

Subclass	
Class	
ISSUE CLASSIFICATION	

**PATENT NUMBER**

U.S. UTILITY Patent Application

PD	O.I.P.E.	PATENT DATE
SCANNED	MS	Q.A. CC

APPLICATION NO.	CONT/PRIOR	CLASS	SUBCLASS	ART UNIT	EXAMINER
09/548449	D	514	-	1635	J. Higley

## APPlicants

APPLICANT  
John Doe

TITLE

三、在本办法施行前，已经取得《医疗机构执业许可证》的中医诊所，应当自本办法施行之日起六个月内向所在地县级中医药管理部门申请换发《医疗机构执业许可证》，逾期不申请换发的，由中医药管理部门依法予以处理。

PTO-2040  
12/99

## **ISSUING CLASSIFICATION**

TERMINAL DISCLAIMER	DRAWINGS			CLAIMS ALLOWED	
	Sheets Drwg.	Figs. Drwg.	Print Fig.	Total Claims	Print Claim for O.G.
<input type="checkbox"/> The term of this patent subsequent to _____ (date) has been disclaimed.				NOTICE OF ALLOWANCE MAILED	
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	(Assistant Examiner)	(Date)		Amount Due	Date Paid
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